Substitute for Form 1449B/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

Sheet 1 of 1

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Application Number	10/675,497					
Filing Date	09/30/2003					
First Inventor	Mark S. Ortiz					
Art Unit	3731					
Examiner Name	Natalie R. Pous					
Attorney Docket No.	END5135.0516315					
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Examiner Cite No.1		<u>Document Number</u> Number - Kind Code ² (if known)	Publication Date MM-DD- YYYY	Name of Patentee or Applicant	Pages, columns, lines where releva passages or relevant figures appea		
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Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	Тe
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^{*}EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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			Application No.		10/675	5.497				
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					Mark S. Ortiz					
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